Participant’s Name: ____________________________

Chapter or Club: ____________________________

University of California, Davis Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in the UC Davis Agricultural and Environmental Sciences Field Day, hereinafter called "Activity", I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue The Regents of the University of California, its officers, employees, and agents from liability from any and all claims resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Activity.

Signature of Parent or Guardian ____________________________ Date ____________

Signature of Participant ____________________________ Date ____________

Assumption of Risks: Participation in Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in Activity I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney’s fees brought as a result of my involvement in Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted
by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Parent or Guardian _____________________________ Date ___________

Signature of Participant _____________________________ Date ___________

Consent to Record - I give my permission and authorize the University of California (“UC”), to videotape, audiotape, photograph, record, edit or otherwise reproduce my voice, image or likeness, and to use it in various formats and for the purposes within UC’s mission of teaching, research, public service and patient care. Distribution methods may include but are not limited to the classroom, television (including UCTV, broadcast, cable, and satellite), the Internet (including webcasts and podcasts), print publications or any other medium now existing or later created. UC retains the right not to use the footage for other than archival purposes. Any copyright-protected works that I deliberately provide or otherwise include as part of this recording are either my own property or works for which I have the permission of the copyright-owner to use in this way. I grant, assign, and convey to UC all right, title and interest I, my heirs and assigns, may have in and to any recording made under this consent. I understand this total release of rights irrevocably means that UC may, without limitation, exercise all ownership rights including copyrights relating to the recording(s). I agree to indemnify and hold harmless UC from and against any and all liability, loss, cost, or damage which it may incur as a result of my participation in this recording. If signed by someone other than the person appearing (such as a parent of a minor child), I warrant that I have the authority to grant this permission on behalf of the person(s) appearing.

Signature _____________________________ Date ___________

Print Name ______________________________________